

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/733,775
Filing Date	December 8, 2000
First Named Inventor	Hans A. Mische
Art Unit	3772
Examiner Name	Nehir B. Patel
Attorney Docket Number	M978.12-0001

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number:

00164

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

00164

**OR**

☐ Firm *or*  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

*Statement under 37 CFR 3.73(b) is enclosed.*

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Hans A. Mische

Date

5/13/2011

Telephone

320 282 0717